## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee			Date
Michael Markarian			M M / D D / Y Y Y Y Y 1 1 4 2 0 1 0
Mailing Address 1206 Maryland Avenue, NE			Amount
Cit.	Ctata	Zip Code	11.68
City Washington	State DC	20002	
Purpose of Expenditure		Category/	Office Sought: X House State: CA
Staff Time		Туре	House Senate
Name of Federal Candidate Supported or Opp Mary Bono Mack	osed by Expenditure	): :	President District: 45
mary Bono maon			Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought		10375.77	Disbursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
List America			M M / D D / Y Y Y
Mailing Address 5151 Wisconsin Ave. NW			Amount 2 0 1 0
Suite 400	State	Zip Code	2626.17
City Washington	DC	20016	
Purpose of Expenditure		Category/	Office Sought: X House State: PA
Solicitation & Fundraising Exp		Туре	House Senate
Name of Federal Candidate Supported or Opp Jim Gerlach	osed by Expenditure	:	Check One: X Support Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		2626.17	2010 Cother (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Winning Mark			M M / D D / Y Y Y Y
Mailing Address 2120 L St., NW			M M / D D / Y Y Y Y Y Y Amount
Sixth Floor			11142.00
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure		Category/	Office Sought: X House State: PA
Mass Mailings		Туре	House
Name of Federal Candidate Supported or Opp	osed by Expenditure	:	President District: 06
Jim Gerlach			Check One: X Support Oppose
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought		13768.17	Other (specify)
(a) SUBTOTAL of Itemized Independent Exper	nditures		13779.85
(b) SUBTOTALof Unitemized Independent Exp	penditures		
(c) TOTAL Independent Expenditures(carry total from last page forward t			